

Kentucky Department of Insurance---Life Insurance Division
LONG-TERM CARE RIDERS ATTACHED TO LIFE INSURANCE POLICIES &
ANNUITY CONTRACTS CHECK LIST—July 17, 2003

- KRS 304.14-615 (3) (a) Definition of Pre-existing Condition
- KRS 304.14-615 (6) 30-Day Free Look Period
- KRS 304.14-615 (7) (b) Requirements for Outline of Coverage
- KRS 304.14-615 (9) Requirements for Policy Summary
- KRS 304.14-617 (refers to KRS 194A.700(3)) Definition of “Assisted-Living Community”
- 806 KAR 17:081 Section 1 (4) Definition of “Chronically Ill Individual”
- 806 KAR 17:081 Section 1 (19) Definition of “Maintenance or Personal Care Services”
- 806 KAR 17:081 Section 2 Definitions of:
 - (1) Activities of Daily Living
 - (2) Acute Condition
 - (3) Adult Day Care
 - (4) Bathing
 - (5) Cognitive Impairment
 - (6) Continence
 - (7) Dressing
 - (8) Eating
 - (9) Hands-on Assistance
 - (10) Home Health Care Services
 - (11) Medicare
 - (12) Mental or Nervous Disorder
 - (13) Personal Care
 - (14) Skilled Nursing Care
 - (15) Toileting
 - (16) Transferring
- 806 KAR 17:081 Section 3 (1) (a) Long-Term Care Contracts shall be either Guaranteed Renewable or Noncancellable
- 806 KAR 17:081 Section 3 (2) Limitations and Exclusions
- 806 KAR 17:081 Section 3 (3) Extension of Benefits
- 806 KAR 17:081 Section 3 (4) Continuation or Conversion
- 806 KAR 17:081 Section 3 (5) Group Contract Replacement Requirements

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- 806 KAR 17:081 Section 4 (1) Notice of Unintentional Lapse (60 Days)
- 806 KAR 17:081 Section 4 (2) Reinstatement for Unintentional Lapse (5 months)
- 806 KAR 17:081 Section 5 Required Disclosure Provisions
 - (1) Renewability
 - (2) Riders and Endorsements
 - (3) Payment of Benefits
 - (4) Limitations for Pre-existing Conditions
 - (5) Other Limitations or Conditions on Eligibility for Benefits
 - (6) Disclosure of Tax Consequences
 - (7) Benefit Triggers – Eligibility for the Payment of Benefits
 - (8) Qualified Long Term Care Insurance Contracts
 - (9) Nonqualified Long Term Care Insurance Contracts
- 806 KAR 17:081 Section 6 (3) Required disclosure of Rating Practices to Consumers
- 806 KAR 17:081 Section 7 Initial Filing Requirements
 - (1) copy of the disclosure requirements
 - (2) actuarial certification
- 806 KAR 17:081 Section 8 Prohibition Against Postclaims Underwriting
 - (1) Required language for applications, policies and certificates: Caution Statement
- 806 KAR 17:081 Section 9 Minimum Standards for Home Health and Community Care Benefits in Long-term Care Insurance Policies.
 - (1) list of things that a policy or certificate cannot limit when it provides for home health care or community care services
- 806 KAR 17:081 Section 11 Replacement Requirements
 - (1) questions required on an application
 - (2) replacement forms
- 806 KAR 17:081 Section 17 Filing Requirements for a Group Policy Issued in Another State
- 806 KAR 17:081 Section 18 Filing Requirements for Advertising
- 806 KAR 17:081 Section 19 Standards for Marketing
 - (1) Display prominently by type, stamp, or other appropriate means, on the first page of the outline of coverage and

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(2) policy the following “Notice to buyer: This policy may not cover all of the costs associated with long-term care incurred by the buyer during the period of coverage. The buyer is advised to review carefully all policy limitations.”

- 806 KAR 17:081 Section 23 Standards for Benefit Triggers
- 806 KAR 17:081 Section 24 Additional Standards for Benefit Triggers
for Qualified Long-term Care Insurance Contracts
- 806 KAR 17:081 Section 25 Standard Format Outline of Coverage
- 806 KAR 17:081 Section 29 Illustrations